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Bib Data Sheet

CONFIRMATION NO. 2661

SERIAL NUMBER 10/729,719	FILING OR 371(c) DATE 12/05/2003 RULE	CLASS 062	GROUP ART UNIT 3744	ATTORNEY DOCKET NO. 10467.63US01
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APPLICANTS

Amr Hassan O'Baid, Goleta, CA;
Mark Hanes, Goleta, CA;

**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

**** SMALL ENTITY ****

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

ADDRESS

Merchant & Gould P.C.
P.O. Box 2903
Minneapolis, MN55402-0903

TITLE

CRYOCOOLER HOUSING ASSEMBLY APPARATUS AND METHOD

FILING FEE RECEIVED 1310	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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